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## BIB DATA SHEET

CONFIRMATION NO. 1327

<b>SERIAL NUMBER</b> 10/718,836	<b>FILING or 371(c) DATE</b> 11/21/2003 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> A328B-USA	
<b>APPLICANTS</b> Yitzhak Zilberman, Santa Clarita, CA; Ross Davis, Rockport, ME; Lee J. Mandell, West Hills, CA; Joseph H. Schulman, Santa Clarita, CA; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 02/20/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /JOSEPH A STOKLOSA/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance JS Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 24	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> ALFRED E. MANN FOUNDATION FOR SCIENTIFIC RESEARCH PO BOX 905 SANTA CLARITA, CA 91380 UNITED STATES					
<b>TITLE</b> METHOD OF PLACING AN IMPLANTABLE DEVICE PROXIMATE TO NEURAL/MUSCULAR TISSUE					
<b>FILING FEE RECEIVED</b> 1018	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		